



## ecology and environment, inc.

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International Specialists in the Environmental Sciences

DATE: September 4, 1980  
TO: File  
FROM: Mark Hutson & Rod Bloese. *[initials]*  
SUBJECT: On-site inspection at E. Chicago, GATX  
TDD# F5-8008-10



On the above date, John Cerocke, Jerry Oskvarek, and the authors met with representatives of and inspected the subject site. During the meetings we were given a historical perspective of site activities and a description of current practices. The GATX personnel present during both the meetings and inspection were Mr. E.S. Parker and Mr. John D. Levin. Mr. Parker is the corporate manager of safety and environmental affairs and Mr. Levin is a corporate attorney.

The on-site inspection revealed a situation much changed from the site described and inspected by EPA personnel. There are three small lagoons on the property rather than one large lagoon. Effluent enters the primary pond where sludge is settled out and floating scum is skimmed off. The liquids are then drained off into the secondary pond. The materials on the sides of the second pond were visible near the water level. They consisted of mixed sands, gravels, and fill material. The water level in the secondary pond was lower than the water level in the primary pond. A third lagoon is used to collect runoff and serve as an overflow protection lagoon. The general layout and location of the site are shown on the attached sketches.

Between the ponds and the Indiana Harbor Canal is 5 acres of former railroad property which is now owned by GATX. According to Mr. Parker, GATX plans to build a water treatment facility on this land. As part of the preliminary site investigation for the treatment facility GATX has installed 3 stainless steel monitor wells. The depths of these wells are thought to be 20-25 feet. Approximate well locations are marked on the site sketch.

In order to ascertain the existence of groundwater contamination from the lagoon we suggest a series of monitor wells be installed both up and down gradient. This would include soils analysis of representative samples of the underlying materials and chemical analysis of water samples.

MH,RB/ct

## III. INSPECTION INFORMATION (continued)

## D. GENERATOR INFORMATION (sources of waste)

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
GATX CORPORATION TANK CAR REPAIR PLANT #2	219-308-6300	1005 W. 10TH ST. EAST CHICAGO, IL 60640	TANK CAR WASTE POSSIBLE CONTAMINANTS

## E. TRANSPORTER/HAULER INFORMATION

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED

## F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.

1. NAME	2. TELEPHONE NO.	3. ADDRESS
SEA CHEMICAL WASTE SERVICES, INC.	716-754-8800	MODEL 1000 R.V. 11/107

## G. DATE OF INSPECTION

(mo., day, & yr.)  
SEPTEMBER 4, 1980

## H. TIME OF INSPECTION

1100 HOURS

## I. ACCESS GAINED BY: (credentials must be shown in all cases)

☒ 1. PERMISSION

☐ 2. WARRANT

## J. WEATHER (describe)

Clear, F, 60-70

## IV. SAMPLING INFORMATION

A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.

1. SAMPLE TYPE	2. SAMPLE TAKEN (mark 'X')	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER			
b. SURFACE WATER			
c. WASTE			
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER (specify)			

## B. FIELD MEASUREMENTS TAKEN (e.g., radioactivity, explosivity, PH, etc.)

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS



POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT

REGION

5

SITE NUMBER (to be assigned by HQ)

GENERAL INSTRUCTIONS: Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition (Section II). File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME GATX CORPORATION TANK CAR REPAIR PLANT No. 2		B. STREET (or other identifier) 4245 RAILROAD AVENUE	
C. CITY EAST CHICAGO	D. STATE IND. ANA	E. ZIP CODE 46312	F. COUNTY NAME LAKE
G. SITE OPERATOR INFORMATION		2. TELEPHONE NUMBER	
1. NAME GENERAL AMERICAN TRANSPORTATION CORPORATION		219-378-6000	
3. STREET 120 SOUTH RIVERSIDE PLAZA	4. CITY CHICAGO	5. STATE ILLINOIS	6. ZIP CODE 60606
H. REALTY OWNER INFORMATION (if different from operator of site)			
1. NAME		2. TELEPHONE NUMBER	
3. CITY		4. STATE	
		5. ZIP CODE	

I. SITE DESCRIPTION  
SCUM COLLECTION POND FOR TANK CAR REFURBISHING PLANT

J. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE

II. TENTATIVE DISPOSITION (complete this section last)

A. ESTIMATE DATE OF TENTATIVE DISPOSITION (mo., day, & yr.) UNKNOWN	B. APPARENT SERIOUSNESS OF PROBLEM <input type="checkbox"/> 1. HIGH <input checked="" type="checkbox"/> 2. MEDIUM <input type="checkbox"/> 3. LOW <input type="checkbox"/> 4. NONE
C. PREPARER INFORMATION	
1. NAME JEROME D. OSKVAREK	2. TELEPHONE NUMBER 312-663-9415
3. DATE (mo., day, & yr.) SEPTEMBER 4, 1980	

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION		
1. NAME MARK HUTSON	2. TITLE HMM GEOLOGIST	
3. ORGANIZATION ECOLOGY AND ENVIRONMENT, INC.	4. TELEPHONE NO. (area code & no.) 312-663-9415	
B. INSPECTION PARTICIPANTS		
1. NAME	2. ORGANIZATION	3. TELEPHONE NO.

RODNEY BLOESC	ECOLOGY & ENVIRONMENT, INC.	312-663-9415
JEROME OSKVAREK	ECOLOGY & ENVIRONMENT, INC.	312-663-9415
JOHN	ECOLOGY & ENVIRONMENT, INC.	312-663-9415

C. SITE REPRESENTATIVES INTERVIEWED (corporate officials, workers, residents)		
1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
F.S. PARKER	MANAGER OF SAFETY AND ENVIRONMENTAL AFFAIRS 312-661-6390	GATX 120 S. RIVERSIDE PLAZA CHICAGO, ILL 60606
JOHN D. LEVIN	LAWYER 312-661-4578	GATX 120 S. RIVERSIDE PLAZA CHICAGO, ILL 60606

## IV. SAMPLING INFORMATION (continued)

C. PHOTOS	
1. TYPE OF PHOTOS <input checked="" type="checkbox"/> a. GROUND <input type="checkbox"/> b. AERIAL	2. PHOTOS IN CUSTODY OF: <u>MARK HUTSOE, LEE, INC.</u>
D. SITE MAPPED? <input type="checkbox"/> YES. SPECIFY LOCATION OF MAPS:	
E. COORDINATES	
1. LATITUDE (deg.-min.-sec.) <u>41° 38' 13"</u>	2. LONGITUDE (deg.-min.-sec.) <u>87° 38' 24"</u>

## V. SITE INFORMATION

A. SITE STATUS		
<input checked="" type="checkbox"/> 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)	<input type="checkbox"/> 2. INACTIVE (Those sites which no longer receive wastes.)	<input type="checkbox"/> 3. OTHER (specify): (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)
B. IS GENERATOR ON SITE? <input type="checkbox"/> 1. NO <input checked="" type="checkbox"/> 2. YES (specify generator's four-digit SIC Code): _____		
C. AREA OF SITE (in acres) <u>1.2</u>	D. ARE THERE BUILDINGS ON THE SITE? <input type="checkbox"/> 1. NO <input checked="" type="checkbox"/> 2. YES (specify): _____	

## VI. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

X' A. TRANSPORTER	X' B. STORER	X' C. TREATER	X' D. DISPOSER
1. RAIL	1. PILE	1. FILTRATION	1. LANDFILL
2. SHIP	<input checked="" type="checkbox"/> 2. SURFACE IMPOUNDMENT	2. INCINERATION	2. LANDFARM
3. BARGE	3. DRUMS	3. VOLUME REDUCTION	3. OPEN DUMP
4. TRUCK	4. TANK, ABOVE GROUND	4. RECYCLING/RECOVERY	4. SURFACE IMPOUNDMENT
5. PIPELINE	5. TANK, BELOW GROUND	5. CHEM./PHYS./TREATMENT	5. MIDNIGHT DUMPING
6. OTHER (specify):	6. OTHER (specify):	6. BIOLOGICAL TREATMENT	6. INCINERATION
		7. WASTE OIL REPROCESSING	7. UNDERGROUND INJECTION
		8. SOLVENT RECOVERY	8. OTHER (specify):
		9. OTHER (specify):	

E. SUPPLEMENTAL REPORTS: If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this form.

<input type="checkbox"/> 1. STORAGE	<input type="checkbox"/> 2. INCINERATION	<input type="checkbox"/> 3. LANDFILL	<input checked="" type="checkbox"/> 4. SURFACE IMPOUNDMENT	<input type="checkbox"/> 5. DEEP WELL
<input type="checkbox"/> 6. CHEM/BIO/PHYS TREATMENT	<input type="checkbox"/> 7. LANDFARM	<input type="checkbox"/> 8. OPEN DUMP	<input type="checkbox"/> 9. TRANSPORTER	<input type="checkbox"/> 10. RECYCLOR/RECLAIMER

## VII. WASTE RELATED INFORMATION

A. WASTE TYPE				
<input checked="" type="checkbox"/> 1. LIQUID	<input checked="" type="checkbox"/> 2. SOLID	<input type="checkbox"/> 3. SLUDGE	<input type="checkbox"/> 4. GAS	
B. WASTE CHARACTERISTICS				
<input type="checkbox"/> 1. CORROSIVE	<input checked="" type="checkbox"/> 2. IGNITABLE	<input type="checkbox"/> 3. RADIOACTIVE	<input checked="" type="checkbox"/> 4. HIGHLY VOLATILE	
<input checked="" type="checkbox"/> 5. TOXIC	<input type="checkbox"/> 6. REACTIVE	<input type="checkbox"/> 7. INERT	<input checked="" type="checkbox"/> 8. FLAMMABLE	
<input type="checkbox"/> 9. OTHER (specify):				
C. WASTE CATEGORIES				
1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.				

## VII. WASTE RELATED INFORMATION (continued)

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE		b. OIL		c. SOLVENTS		d. CHEMICALS		e. SOLIDS		f. OTHER	
AMOUNT		AMOUNT		AMOUNT		AMOUNT		AMOUNT		AMOUNT	
UNIT OF MEASURE		UNIT OF MEASURE		UNIT OF MEASURE		UNIT OF MEASURE		UNIT OF MEASURE		UNIT OF MEASURE	
<input checked="" type="checkbox"/> (1) PAINT, PIGMENTS		<input checked="" type="checkbox"/> (1) OILY WASTES		<input checked="" type="checkbox"/> (1) HALOGENATED SOLVENTS		<input checked="" type="checkbox"/> (1) ACIDS		<input checked="" type="checkbox"/> (1) FLYASH		<input checked="" type="checkbox"/> (1) LABORATORY, PHARMACEUT.	
(2) METALS SLUDGES		(2) OTHER (specify):		(2) NON-HALOGENATED SOLVENTS		(2) PICKLING LIQUORS		(2) ASBESTOS		(2) HOSPITAL	
(3) POTW			(3) OTHER (specify):		(3) CAUSTICS		(3) MILLING/MINE TAILINGS		(3) RADIOACTIVE		
(4) ALUMINUM SLUDGE				(4) PESTICIDES		(4) FERROUS SMELTING WASTES		(4) MUNICIPAL			
(5) OTHER (specify):				(5) DYES/INKS		(5) NON-FERROUS SMELTING WASTES		(5) OTHER (specify):			
				(6) CYANIDE		(6) OTHER (specify):					
					(7) PHENOLS						
					(8) HALOGENS						
					<input checked="" type="checkbox"/> (9) PCB						
					(10) METALS						
					<input checked="" type="checkbox"/> (11) OTHER (specify):						

D. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE (place in descending order of hazard)

1. SUBSTANCE	2. FORM (mark 'X')			3. TOXICITY (mark 'X')				4. CAS NUMBER	5. AMOUNT	6. UNIT
	a. SOLID	b. LIQ.	c. VAPOR	a. HIGH	b. MED.	c. LOW	d. NONE			

## VIII. HAZARD DESCRIPTION

FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided.

☐ A. HUMAN HEALTH HAZARDS

☐ H. DAMAGE TO FLORA/FAUNA☐ I. FISH KILL☐ J. CONTAMINATION OF AIR☒ K. NOTICEABLE ODORS  
*Handwritten notes in this section:*  
...  
...  
...☒ L. CONTAMINATION OF SOIL  
*Handwritten notes in this section:*  
...  
...  
...☐ M. PROPERTY DAMAGE

## VIII. HAZARD DESCRIPTION (continued)

☐ B. NON-WORKER INJURY/EXPOSURE☐ C. WORKER INJURY/EXPOSURE☐ D. CONTAMINATION OF WATER SUPPLY☐ E. CONTAMINATION OF FOOD CHAIN☒ F. CONTAMINATION OF GROUND WATER☒ G. CONTAMINATION OF SURFACE WATER

# VIII. HAZARD DESCRIPTION (continued)

☐ T. MIDNIGHT DUMPING

☐ U. OTHER (specify):

## IX. POPULATION DIRECTLY AFFECTED BY SITE

A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE (specify units)
1. IN RESIDENTIAL AREAS				
2. IN COMMERCIAL OR INDUSTRIAL AREAS	70		5	2.1 miles
3. IN PUBLICLY TRAVELLED AREAS				
4. PUBLIC USE AREAS (parks, schools, etc.)				

## X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER (specify unit) 1 foot	B. DIRECTION OF FLOW North	C. GROUNDWATER USE IN VICINITY None
D. POTENTIAL YIELD OF AQUIFER -	E. DISTANCE TO DRINKING WATER SUPPLY (specify unit of measure) 1/2 mile	F. DIRECTION TO DRINKING WATER SUPPLY North
G. TYPE OF DRINKING WATER SUPPLY		
<input type="checkbox"/> 1. NON-COMMUNITY < 15 CONNECTIONS* <input checked="" type="checkbox"/> 2. COMMUNITY (specify town): <u>San Francisco</u>		
<input type="checkbox"/> 3. SURFACE WATER <input type="checkbox"/> 4. WELL		



## VIII. HAZARD DESCRIPTION (continued)

☐ N. FIRE OR EXPLOSION☐ O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID☐ P. SEWER, STORM DRAIN PROBLEMS☐ Q. EROSION PROBLEMS☒ R. INADEQUATE SECURITY

*There is a security problem with the site. The site is not properly secured and there is a possibility of unauthorized access.*

☐ S. INCOMPATIBLE WASTES



## X. WATER AND HYDROLOGICAL DATA (continued)

## H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH (specify unit)	3. LOCATION (proximity to population/buildings)	4. NON-COM- MUNITY (mark 'X')	5. COMMUN- ITY (mark 'X')

## I. RECEIVING WATER

1. NAME

☐ 2. SEWERS☐ 3. STREAMS/RIVERS☐ 4. LAKES/RESERVOIRS☐ 5. OTHER (specify):

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATERS

## XI. SOIL AND VEGETATION DATA

LOCATION OF SITE IS IN:

☐ A. KNOWN FAULT ZONE☐ B. KARST ZONE☐ C. 100 YEAR FLOOD PLAIN☐ D. WETLAND☒ E. A REGULATED FLOODWAY☐ F. CRITICAL HABITAT☐ G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

## XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark 'X' to indicate the type(s) of geological material observed and specify where necessary, the component parts.

X	A. OVERBURDEN	X	B. BEDROCK (specify below)	X	C. OTHER (specify below)
X	1. SAND				
X	2. CLAY				
X	3. GRAVEL				

## XIII. SOIL PERMEABILITY

☐ A. UNKNOWN☐ B. VERY HIGH (100,000 to 1000 cm/sec.)☐ C. HIGH (1000 to 10 cm/sec.)☐ D. MODERATE (10 to .1 cm/sec.)☐ E. LOW (.1 to .001 cm/sec.)☐ F. VERY LOW (.001 to .00001 cm/sec.)

## G. RECHARGE AREA

☐ 1. YES☒ 2. NO

3. COMMENTS:

## H. DISCHARGE AREA

☐ 1. YES☒ 2. NO

3. COMMENTS:

## I. SLOPE

1. ESTIMATE % OF SLOPE

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.

## J. OTHER GEOLOGICAL DATA

<b>SURFACE IMPOUNDMENTS SITE INSPECTION REPORT</b> <i>(Supplemental Report)</i>		<b>INSTRUCTION</b> Answer and Explain as Necessary.
1. TYPE OF IMPOUNDMENT		
2. STABILITY/CONDITION OF EMBANKMENTS		
3. EVIDENCE OF SITE INSTABILITY (Erosion, Settling, Sink Holes, etc.)		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
4. EVIDENCE OF DISPOSAL OF IGNITABLE OR REACTIVE WASTE		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
5. ONLY COMPATIBLE WASTES ARE STORED OR DISPOSED OF IN THE IMPOUNDMENT		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
6. RECORDS CHECKED FOR CONTENTS AND LOCATION OF EACH SURFACE IMPOUNDMENT		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
7. IMPOUNDMENT HAS LINER SYSTEM	7a. INTEGRITY OF LINER SYSTEM CHECKED	
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	
7b. FINDINGS		
8. SOIL STRUCTURE AND SUBSTRUCTURE		
9. MONITORING WELLS		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
10. LENGTH, WIDTH, AND DEPTH		
LENGTH	WIDTH	DEPTH
11. CALCULATED VOLUMETRIC CAPACITY		
12. PERCENT OF CAPACITY REMAINING		
13. ESTIMATE FREEBOARD		
14. SOLIDS DEPOSITION		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
15. DREDGING DISPOSAL METHOD		
16. OTHER EQUIPMENT		